



MICHIGAN DEPARTMENT OF ATTORNEY GENERAL
Mike Cox, Attorney General

TELEMARKETER TRACKING FORM
Keep this form by your telephone

Date of Call: _____ Time of call: _____

Ask the Organization Placing the Call

Name: _____ Individual's name: _____

Address: _____

Phone number: _____

Product or service offered: _____

Did you ask them to put you on their **DO-NOT-CALL** list? _____ Yes _____ No



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